



# Senate

General Assembly

**File No. 656**

January Session, 2015

Substitute Senate Bill No. 917

*Senate, April 15, 2015*

The Committee on Public Health reported through SEN. GERRATANA of the 6th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## **AN ACT CONCERNING SCHOOL-BASED HEALTH CENTERS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2015*) (a) As used in sections  
2 19a-6i of the general statutes, as amended by this act, 19a-7d of the  
3 general statutes, as amended by this act, and 19a-638 of the general  
4 statutes, as amended by this act:

5 (1) "School-based health center" means a health center that: (A) Is  
6 located in, or on the grounds of, a school facility of a school district or  
7 school board or of an Indian tribe or tribal organization; (B) is  
8 organized through school, community and health provider  
9 relationships; (C) is administered by a sponsoring facility; and (D)  
10 provides comprehensive medical and behavioral health services to  
11 children and adolescents in accordance with state and local law,  
12 including laws relating to licensure and certification.

13 (2) "Sponsoring facility" means a: (A) Hospital; (B) public health  
14 department; (C) community health center; (D) nonprofit health or

15 human services agency; (E) school or school system; or (F) program  
16 administered by the Indian Health Service or the Bureau of Indian  
17 Affairs or operated by an Indian tribe or a tribal organization.

18 (b) No person or entity shall use the term "school-based health  
19 center" to describe a facility or make use of any words, letters or  
20 abbreviations that may reasonably be confused with said term unless  
21 the facility meets the definition of a school-based health center in  
22 subsection (a) of this section.

23 (c) The Department of Public Health shall adopt regulations, in  
24 accordance with the provisions of chapter 54 of the general statutes, to  
25 establish minimum quality standards for school-based health centers,  
26 as defined in subsection (a) of this section.

27 Sec. 2. Subsection (a) of section 19a-6i of the general statutes is  
28 repealed and the following is substituted in lieu thereof (*Effective*  
29 *October 1, 2015*):

30 (a) There is established a school-based health center advisory  
31 committee for the purpose of advising the Commissioner of Public  
32 Health on matters relating to (1) statutory and regulatory changes to  
33 improve health care through access to school-based health centers, and  
34 (2) minimum standards for the provision of services in school-based  
35 health centers to ensure that high quality health care services are  
36 provided in school-based health centers, as defined in section 1 of this  
37 act.

38 Sec. 3. Subsection (a) of section 19a-7d of the general statutes is  
39 repealed and the following is substituted in lieu thereof (*Effective*  
40 *October 1, 2015*):

41 (a) The Commissioner of Public Health may establish, within  
42 available appropriations, a program to provide three-year grants to  
43 community-based providers of primary care services in order to  
44 expand access to health care for the uninsured. The grants may be  
45 awarded to community-based providers of primary care for (1)

46 funding for direct services, (2) recruitment and retention of primary  
47 care clinicians and registered nurses through subsidizing of salaries or  
48 through a loan repayment program, and (3) capital expenditures. The  
49 community-based providers of primary care under the direct service  
50 program shall provide, or arrange access to, primary and preventive  
51 services, referrals to specialty services, including rehabilitative and  
52 mental health services, inpatient care, prescription drugs, basic  
53 diagnostic laboratory services, health education and outreach to alert  
54 people to the availability of services. Primary care clinicians and  
55 registered nurses participating in the state loan repayment program or  
56 receiving subsidies shall provide services to the uninsured based on a  
57 sliding fee schedule, provide free care if necessary, accept Medicare  
58 assignment and participate as Medicaid providers, or provide nursing  
59 services in school-based health centers, as defined in section 1 of this  
60 act. The commissioner may adopt regulations, in accordance with the  
61 provisions of chapter 54, to establish eligibility criteria, services to be  
62 provided by participants, the sliding fee schedule, reporting  
63 requirements and the loan repayment program. For the purposes of  
64 this section, "primary care clinicians" includes family practice  
65 physicians, general practice osteopaths, obstetricians and  
66 gynecologists, internal medicine physicians, pediatricians, dentists,  
67 certified nurse midwives, advanced practice registered nurses,  
68 physician assistants and dental hygienists.

69 Sec. 4. Subsection (b) of section 19a-638 of the general statutes is  
70 repealed and the following is substituted in lieu thereof (*Effective*  
71 *October 1, 2015*):

72 (b) A certificate of need shall not be required for:

73 (1) Health care facilities owned and operated by the federal  
74 government;

75 (2) The establishment of offices by a licensed private practitioner,  
76 whether for individual or group practice, except when a certificate of  
77 need is required in accordance with the requirements of section 19a-  
78 493b or subdivision (3), (10) or (11) of subsection (a) of this section;

- 79 (3) A health care facility operated by a religious group that  
80 exclusively relies upon spiritual means through prayer for healing;
- 81 (4) Residential care homes, nursing homes and rest homes, as  
82 defined in subsection (c) of section 19a-490;
- 83 (5) An assisted living services agency, as defined in section 19a-490;
- 84 (6) Home health agencies, as defined in section 19a-490;
- 85 (7) Hospice services, as described in section 19a-122b;
- 86 (8) Outpatient rehabilitation facilities;
- 87 (9) Outpatient chronic dialysis services;
- 88 (10) Transplant services;
- 89 (11) Free clinics, as defined in section 19a-630;
- 90 (12) School-based health centers, as defined in section 1 of this act,  
91 community health centers, as defined in section 19a-490a, not-for-profit  
92 outpatient clinics licensed in accordance with the provisions of chapter  
93 368v and federally qualified health centers;
- 94 (13) A program licensed or funded by the Department of Children  
95 and Families, provided such program is not a psychiatric residential  
96 treatment facility;
- 97 (14) Any nonprofit facility, institution or provider that has a contract  
98 with, or is certified or licensed to provide a service for, a state agency  
99 or department for a service that would otherwise require a certificate  
100 of need. The provisions of this subdivision shall not apply to a short-  
101 term acute care general hospital or children's hospital, or a hospital or  
102 other facility or institution operated by the state that provides services  
103 that are eligible for reimbursement under Title XVIII or XIX of the  
104 federal Social Security Act, 42 USC 301, as amended;
- 105 (15) A health care facility operated by a nonprofit educational

106 institution exclusively for students, faculty and staff of such institution  
107 and their dependents;

108 (16) An outpatient clinic or program operated exclusively by or  
109 contracted to be operated exclusively by a municipality, municipal  
110 agency, municipal board of education or a health district, as described  
111 in section 19a-241;

112 (17) A residential facility for persons with intellectual disability  
113 licensed pursuant to section 17a-227 and certified to participate in the  
114 Title XIX Medicaid program as an intermediate care facility for  
115 individuals with intellectual disabilities;

116 (18) Replacement of existing imaging equipment if such equipment  
117 was acquired through certificate of need approval or a certificate of  
118 need determination, provided a health care facility, provider,  
119 physician or person notifies the office of the date on which the  
120 equipment is replaced and the disposition of the replaced equipment;

121 (19) Acquisition of cone-beam dental imaging equipment that is to  
122 be used exclusively by a dentist licensed pursuant to chapter 379;

123 (20) The partial or total elimination of services provided by an  
124 outpatient surgical facility, as defined in section 19a-493b, except as  
125 provided in subdivision (6) of subsection (a) of this section and section  
126 19a-639e;

127 (21) The termination of services for which the Department of Public  
128 Health has requested the facility to relinquish its license; or

129 (22) Acquisition of any equipment by any person that is to be used  
130 exclusively for scientific research that is not conducted on humans.

This act shall take effect as follows and shall amend the following sections:

Section 1	October 1, 2015	New section
Sec. 2	October 1, 2015	19a-6i(a)
Sec. 3	October 1, 2015	19a-7d(a)

Sec. 4	October 1, 2015	19a-638(b)
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**PH**      *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

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**OFA Fiscal Note**

**State Impact:** None

**Municipal Impact:** None

**Explanation**

There is no fiscal impact from establishing a definition for School Based Health Centers and requiring the Department of Public Health to adopt regulations that establish minimum quality standards for these centers as the agency has expertise in this area.

**The Out Years**

**State Impact:** None

**Municipal Impact:** None

**OLR Bill Analysis****sSB 917*****AN ACT CONCERNING SCHOOL-BASED HEALTH CENTERS.*****SUMMARY:**

This bill establishes a statutory definition for a “school-based health center,” (SBHC) and requires DPH to adopt regulations to establish minimum quality standards for these centers. Under the bill, an SBHC:

1. is located in or on the grounds of a school facility of a school district, school board, Indian tribe, or tribal organization;
2. is organized through school, community, and health provider relationships;
3. is administered by a sponsoring facility (e.g., hospital, health department, community health center, nonprofit health or human services agency); and
4. provides comprehensive medical and behavioral health services to children and adolescents according to state and local law.

The bill prohibits anyone from using (1) the term SBHC to describe a facility or (2) any words or abbreviations that may be reasonably confused with this term, unless the facility meets the bill’s definition.

The bill also makes technical changes.

EFFECTIVE DATE: October 1, 2015

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 27 Nay 0 (03/27/2015)